

From: [NSW Government](#)
To: [Flood Inquiry](#)
Subject: Floods Inquiry
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Your details

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Submission details

I am making this submission as	Other
Submission type	I am submitting on behalf of my organisation
Organisation making the submission (if applicable)	Rural Doctors' Association NSW
Your position in the organisation (if applicable)	Executive Assistant
Consent to make submission public	I give my consent for this submission to be made public

Share your experience or tell your story

Your story

The Rural Doctors' Association NSW (RDANSW) has been providing support to members and rural doctors in the impacted communities. Members have advised of the distress caused to them due to not having accurate information to prepare for the extent of the damage. Warnings to businesses either didn't happen or were too late. The RDANSW has continued to contact members in the area, promote resources, provide advocacy and is involved in the Natural Disaster & Emergency Response Stakeholder Meeting Group, chaired by the NSW Rural Doctors Network. This group involves around 35 organisations including Resilience NSW, Ministry of Health, Australian Medical Association NSW and the Federal Dept of Health.

Rural doctors have shown extreme commitment to their communities and patients and are frustrated with the lack of assistance there is for practices to relocate or rebuild so that they can deliver the services required by their communities.

Terms of Reference (optional)

The Inquiry welcomes submissions that address the particular matters identified in its [Terms of Reference](#)

1.2 Preparation and planning

In relation to planning for emergencies, there is lack of engagement with local General Practices. Primary Care is an important part of emergency response, ranging from helping to set up and working in evacuation centres, providing medical assistance in the practice or other areas in the community, liaising with the hospital, providing medical equipment & medications, knowledge of areas/groups that may be more vulnerable in natural disasters and emergencies etc.. General Practices work with a network of many other medical professionals, allied health providers and other community services, therefore have an important role to planning in planning and preparation for natural disasters and

emergencies.

The lack of information/understanding of how high the floodwaters would peak at, impacted the measures taken to prepare appropriately for the floods by residents and businesses.

The Evacuation Orders and revoking of the orders needs to be reviewed so that community members are able to relocate to a safe area and stay there for as long as necessary.

1.3 Response to floods

The issuing and response of public warnings needs to take into consideration that not all residents & businesses have access to technology such as computers or smart devices. Unlike their metropolitan counterparts, in the Northern NSW area there are some rural/regional areas that do not have internet /4G capability. An alternative community warning device/system needs to be available to alert residents, particularly those who are more disadvantaged groups and areas.

The loss of telecommunications, power, internet, water and other services and the delays in this being reconnected quickly has had an immense impact on the affected communities. The delay in accepting the Army's involvement needs proper investigation so that this situation is not repeated. The additional stress on community members needing to rescue family, friends, neighbours and other community members who were trapped and/or stranded in impacted areas could have been reduced if appropriate resources were employed sooner.

1.4 Transition from incident response to recovery

Australia has been continually experiencing natural disasters and emergencies and needs to have a robust plan in place to quickly engage the relevant stakeholders. Reporting lines have been confusing and created longer response times.

Access to grants and disaster payments has been difficult for many community members and

businesses. This is due to many factors including limited internet or access to electronic devices, low literacy, homelessness, breadth of impact on residents, clean up, mental health issues &/or medical conditions exacerbated by the trauma experienced. Lack of access to information, delays to decision making, not enough resources (accommodation, food, Doctors, nurse & other health professionals, plus the continued bad weather continues to impact on the ability to plan and recover. This is on a background of already under resourced rural communities trying to recover from bushfires and Covid Pandemic

1.5 Recovery from floods

Delays in getting accommodation and other resources to communities impacted by natural disasters and emergencies needs to be more streamlined.

Current business grants are not fit for purpose. Medical practices that were destroyed during the floods are unable to apply for suitable grants due to current eligibility criteria. e.g. \$200K grant open to businesses with over 21+ employees. This does not necessarily mean that the need for resources and funding does not exist. In fact, it is significant. General Practices don't always engage doctors as employees, but as a contractor due to different models of care that GPs can provide to other organisations, e.g. public and private hospitals, Aboriginal Health Services etc. Practices that have had to relocate and set up a temporary practices have been able to access very limited assistance from the government and services such as the Primary Health Network and have had to pay for things replacement equipment individually and hope to be entitled to reimbursement. There is a lot of funding for Mental Health Services however the delay in practical assistance such as access to suitable accommodation, food security, work spaces, child care & access to medical professionals, particularly face to face, need priority. There are a number of practices that provide employment to the local community that

are at threat of closure, which would further exacerbate healthcare capability in rural & regional Australia.

1.6 Any other matters

Many social issues have been exacerbated in this area and continue to have a flow on effect to other communities, including housing crisis, medical workforce crisis, employment, child care etc.

More investment in local communities is needed so that they can be more self sufficient and resilient.

Rural / regional communities can and have shown that they can care for themselves, however, appropriate and timely funding is required so that residents & businesses can continue to support their local community.

Supporting documents or images
